



CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES

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Governor

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Janie Miller
Secretary

Elizabeth A. Johnson
Commissioner

March 31, 2009

TO: Durable Medical Equipment (90) Provider Letter A-34

RE: **Enteral Nutrition**

Dear Kentucky Medicaid Provider:


This notification is to inform you of an upcoming change to the Durable Medical Equipment program. Reimbursement methodology for enteral nutrition will change as described below.

Effective for new requests with dates of service beginning June 1, 2009:

1. Enteral formulas will be priced using calorie per unit for codes **B4149, B4150, B4152, B4153, B4154 and B4155**. The calorie per unit is indicated on the fee schedule for each of the codes.
2. The following codes **B4157, B4158, B4159, B4160, B4161 and B4162** will continue to use manual pricing. The calorie per unit is listed on the fee schedule for each of these codes if applicable.
3. The individual listings for the formulas will be removed from the fee schedule. This change will eliminate the need to have individual formulas added to the fee schedule.
4. This change mirrors Medicare pricing methodology and will allow uniform pricing.
5. This change will not affect the prior authorizations that have been issued prior to June 1, 2009.

If you have questions or concerns, please contact the Division of Provider Operations at 502-564-2687.

Sincerely,


Elizabeth A. Johnson
Commissioner

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